

**New Hampshire UCC Form 11-U
Information Request Version 2.1**

For Filing Office Use Only:

A. Name and Phone of Contact at Requestor:

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B. Return to (Name and Address):

Received: _____

Search Fee: _____

Copies: _____ Fee: _____

Total: _____

Amount of Check: _____

Check #: _____

Cash Slip #: _____

Picked up: _____

1. DEBTOR NAME to be searched - Insert only one debtor name in 1a or 1b. - Do not combine names.

1A. ORGANIZATION NAME

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1B. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

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2. INFORMATION OPTIONS relating to UCC filings and other notices that include as a debtor, the name indicated in item 1. Select one of the following:

2a. ☐ Certified Search Response (check this box to request a response that is complete, including all filings that are on file.)

2b. ☐ Certified Search With Copies (check this box to request a response that includes all filings and copies that are on file.)

2c. ☐ Specified Copies only ☐ CERTIFIED JACKET (optional)

Record Number	Date Record Filed (if required)

2d. ☐ Copies Requested for Specific Time Period Only: Exact copies of all financing statements requested in item 1 filed after _____ and before _____.

3. Type of Service Requested:

3a. Service (applicable only to State UCC office)

- ☐ Routine (\$10 plus \$1 per copy)
☐ 24-Hour Expedited (additional \$15)
☐ Same-Day Expedited (additional \$25)

3b. Cost of copies will not exceed the indicated maximum below

- ☐ \$25.00 ☐ \$50.00
☐ \$100.00 ☐ no limit

4. Information Request Certificate:

- ☐ An information request of our files was made per your request, revealing the attached list or copies as of _____
☐ No filings were revealed as a result of the search, through date _____

Date/time completed: _____ By: _____